

CENTRAL MAINE TEAM PENNING ASSOCIATION

www.cmtpa.com

2012 Application for Membership

New member: ____ Renewal: ____ Date: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Country: _____

Phone: _____ E-mail _____ Send club news via email? Yes ____ No ____

____ Individual - \$25 (Deduct \$5 for each banner sponsor obtained by you in 2011; verified by CMTPA BOD)

____ Family - \$40

List family members (children 18 & under). Please circle appropriate relationship to above name.

_____ Spouse Child _____

_____ Child

_____ Child

Rider Rating: If previous member, please list rider rating: ____

Please list rating with any other penning club: ____

Please check the following:

Riding ability:

Novice ____

Average ____

Experienced ____

Professional ____

Horse ability:

Green ____

Average ____

Experienced ____

Money-earner ____

Riding ability(penning):

Novice ____

Average ____

Experienced ____

Professional ____

Horse ability(penning):

Green ____

Average ____

Experienced ____

Money-earner ____

Rider rating will be assigned based on ability of the horse and rider, by the CMTPA Board of Directors.

Please send application and check or money order to:

Central Maine Team Penning Association

c/o Laura Ingerson, Secretary

25 Arrowhead Road

Bar Harbor, ME 04609

For secretary's use only: Received on: _____ Check number: _____ Cash: _____

banner sponsors obtained prior year? _____ (Deduction of \$5/banner sponsor)

PLEASE FLIP OVER FOR LIABILITY RELEASE SIGNATURES. PLEASE FLIP OVER FOR LIABILITY RELEASE SIGNATURES.

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RELEASE AGREEMENT 2012

PLEASE READ CAREFULLY BEFORE SIGNING

(Initial) _____ I acknowledge that I participate in Central Maine Team Penning events totally at my own risk for injuries or property damage I or my family may incur and, I acknowledge that I hereby release and hold harmless the sponsor, co-sponsors, their owners, their officers, directors, members, affiliated organizations, cattle provider and others acting on its behalf, from any claim, legal liability, legal action or right for damages, for any accident which may occur to me or my equine animal. I also assume and accept full responsibility for any damages done by me or my equine animal at shows, activities or events.

I, the undersigned, Participant, Parent or Legal Guardian, being of legal age, have read, understand and initialed the above agreement and release.

NAME OF PARTICIPANT (please print)

SIGNATURE OF PARTICIPANT (must sign for self)

DATE

NAME OF PARTICIPANT (please print)

SIGNATURE OF PARTICIPANT (must sign for self)

DATE

NAME OF PARENT/GUARDIAN (please print)

SIGNATURE OF PARENT/GUARDIAN

DATE

ADDRESS PHONE